

**HART, BAXLEY, DANIELS & HOLTON**  
90 JOHN STREET, SUITE 309  
NEW YORK, NY 10038

**RECEIVED**  
**CENTRAL FAX CENTER**  
**NOV 16 2004**

Phone: (212) 791-7200

Fax: (212) 791-7276

**TELECOPIER COVER PAGE**

**DATE: November 16, 2004**

**OUR REF: 15011 B**

TO	COMPANY	FAX NUMBER
General Incoming Receipt Center	USPTO	1-703-872-9306

**FROM: Charles E. Baxley**

**4 Pages**  
(INCLUDING COVER SHEET)

**RE:** This firm's reference 15011B  
US Pat Appln 10/678,149 - 06 Oct 03  
Messrs. Ruey Zon CHEN, George KU and Eric LO, Inventors

**Gentlepersons:**

**Attached hereto is a Revocation of Power of Attorney and Appointment of Power of Attorney to be entered into the record of the above referenced United States Patent Application.**

**Your courtesy, cooperation and skill are appreciated.**

**Respectfully,**

**Charles E. Baxley**

**Attachment**

PTO/SB/02 (08-03)

Approved for use through 11/30/2005, OMB 0851-0035

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**REVOCACTION OF POWER OF  
ATTORNEY WITH  
NEW POWER OF ATTORNEY  
AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/678,149
Filing Date	10/06/2003
First Named Inventor	Eric LO
Art Unit	3724
Examiner Name	WATT, DOUGLAS D
Attorney Docket Number	15011 B

**RECEIVED**  
**CENTRAL FAX CENTER**  
**NOV 16 2004**

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

36672

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with  
Customer Number:

36672

OR

<input type="checkbox"/> Firm or Individual Name	CHARLES E. BAXLEY, ESQUIRE				
Address	90 JOHN STREET, SUITE 309				
Address					
City	NEW YORK	State	NEW YORK	Zip	10038
Country	U.S.A.				
Telephone	212-791-7200	Fax	212-791-7276		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name	Eric LO		
Signature	Eric LO		
Date	11/11/2004	Telephone	212-791-7200

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 3 forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/02 (09-00)

Approved for use through 11/30/2005. CMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

**REVOCATION OF POWER OF  
ATTORNEY WITH  
NEW POWER OF ATTORNEY  
AND  
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/678,149
Filing Date	10/06/2003
First Named Inventor	George KU
Art Unit	3724
Examiner Name	WATT, DOUGLAS D
Attorney Docket Number	15011 B

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

36672

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with  
Customer Number:

36672

OR

<input type="checkbox"/> Firm or Individual Name	CHARLES E. BAXLEY, ESQUIRE				
Address	90 JOHN STREET, SUITE 308				
Address					
City	NEW YORK	State	NEWYORK	Zip	10038
Country	U.S.A.				
Telephone	212-791-7200	Fax	212-791-7276		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

**SIGNATURE of Applicant or Assignee of Record**

Name	George KU		
Signature	<i>George Ku</i>		
Date	11/11/2004	Telephone	212-791-7200

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 3 forms are submitted.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

PTO/SB/82 (09-03)

Approved for use through 11/30/2006. OMB 0651-0035

U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND CHANGE OF CORRESPONDENCE ADDRESS</b>	Application Number	10/678,149
	Filing Date	10/06/2003
	First Named Inventor	Ruey Zon CHEN
	Art Unit	3724
	Examiner Name	WATT, DOUGLAS D
	Attorney Docket Number	15011 B

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

36672

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with Customer Number:

36672

OR

<input type="checkbox"/> Firm or Individual Name	CHARLES E. BAXLEY, ESQUIRE				
Address	80 JOHN STREET, SUITE 308				
Address					
City	NEW YORK	State	NEW YORK	Zip	10038
Country	U.S.A.				
Telephone	212-791-7200	Fax	212-791-7276		

I am the:

☒ Applicant/Inventor.

☐ Assignee of record of the entire interest. See 37 CFR 3.71.  
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)
**SIGNATURE of Applicant or Assignee of Record**

Name	Ruey Zon CHEN		
Signature	<i>Ruey - zon chen</i>		
Date	11/11/2004	Telephone	212-791-7200

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 3 forms are submitted.

This collection of information is required by 37 CFR 1.38. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.